

P11000101458

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000279504 3)))



H110002795043ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : DORAL CORPORATE FILING SERVICE
Account Number : I20070000081
Phone : (305) 436-0979
Fax Number : (305) 592-5575

RECEIVED NOV 28 2011

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

Martinez Holding Company, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 NOV 28 PM 12:12

FILED

MRS 11/29

H11000279504

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME Martinez Holding Company, Inc.
The name of the corporation shall be:

11 NOV 28 PM 12:12

ARTICLE II PRINCIPAL OFFICE
Principal street address
9585 NW 28th Street
Coral Springs, FL 33065

SECRETARY OF STATE
MAILING ADDRESS, FLORIDA

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To engage in any lawful business.

ARTICLE IV SHARES
The number of shares of stock is: 100 Common Shares with \$1.00 par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Margarita M. Martinez- President	Name and Title: _____
Address: 9585 NW 28th Street	Address: _____
Coral Springs, FL 33065	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Carlos E. Garcia CPA
Address: 10691 N. Kendall Drive Ste 301
Miami, FL 33176

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Carlos E. Garcia
Address: 10691 N. Kendall Drive Ste 301
Miami, FL 33176

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

11-28-11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.

Required Signature/Incorporator

11-28-11

Date

H11000279504